

**Fill in this information to identify your case:**

Debtor 1 Roland W. Tremblay Jr.  
Debtor 2 Lisa J. Tremblay  
(Spouse, if filing)  
United States Bankruptcy Court for the District of Massachusetts  
Case number 4:19-bk-40372  
(If known)

☒ Check if this is an amended filing

**Official Form 106Sum**

**Amended Summary of Your Assets and Liabilities and Certain Statistical Information 12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

**Part 1: Summarize Your Assets**

	<b>Your assets</b> Value of what you own
<b>1. Schedule A/B: Property</b> (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	<u>\$199,000.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	<u>\$26,339.82</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	<u>\$225,339.82</u>

**Part 2: Summarize Your Liabilities**

	<b>Your liabilities</b> Amount you owe
<b>2. Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....	<u>\$192,103.00</u>
<b>3. Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	<u>\$0.00</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	<u>\$259,905.66</u>
<b>Your total liabilities</b>	<u>\$452,008.66</u>

**Part 3: Summarize Your Income and Expenses**

<b>4. Schedule I: Your Income</b> (Official Form 106I)	
Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	<u>\$5,914.41</u>
<b>5. Schedule J: Your Expenses</b> (Official Form 106J)	
Copy your monthly expenses from line 22, Column A, of <i>Schedule J</i> .....	<u>\$5,618.53</u>

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**  
☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
☒ Yes

**7. What kind of debt do you have?**  
☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9 for statistical purposes. 28 U.S.C. § 159.  
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income** (Official Form 122A-1, 122B, or 122C-1):  
 Copy your total current monthly income from line 11..... \$6,553.60

**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:** .....

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.).....	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.).....	<u>\$0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) .....	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.).....	<u>\$0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.).....	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.).....	<u>\$0.00</u>
9g. <b>Total.</b> Add lines 9a through 9f.....	<u>\$0.00</u>

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Official Form 106E/F

Amended Schedule E/F: Creditors Who Have Unsecured Claims 12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?  
☒ No. Go to Part 2.  
☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?  
☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes.
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than four priority unsecured claims fill out the Continuation Page of Part 2.

Total claim

4.1  
At T Directv  
Nonpriority Creditor's Name  
PO Box 57547  
Number Street

Jacksonville FL 32241

City, State, ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number: -8887

\$249.00

When was the debt incurred: 05/2018

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Collection Account

		Total claim
<b>4.2</b> <b>AtT Mobility</b> Nonpriority Creditor's Name <b>Sunrise Credit Srvc</b> Number Street <b>260 Airport Plaza</b> <b>Farmingdale NY 11735</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-7484</b>  When was the debt incurred: <b>06/18/2018</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Utility</b>	\$525.95
<b>4.3</b> <b>Cahill's Tire Center, Inc</b> Nonpriority Creditor's Name <b>33 Sutton Avenue</b> Number Street <b>Oxford MA 01540</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b>  When was the debt incurred: <b>07/19/2017</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Personal Loan</b>	\$903.71
<b>4.4</b> <b>Capital One</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> Number Street <b>P.O. Box 30285</b> <b>Salt Lake City UT 84130</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-3234</b>  When was the debt incurred: <b>02/2016</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>ChargeAccount</b>	\$5,967.00
<b>4.5</b> <b>Capital One</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> Number Street <b>P.O. Box 30285</b> <b>Salt Lake City UT 84130</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-3341</b>  When was the debt incurred: <b>05/2017</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	\$291.00

		Total claim
<b>4.6</b> <b>Capital One</b> <hr/> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <hr/> Number Street <b>P.O. Box 30285</b> <hr/> <b>Salt Lake City UT 84130</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-0824</b>  When was the debt incurred: <b>05/2014</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>CreditCard</b>	\$158.00
<b>4.7</b> <b>Capital One</b> <hr/> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <hr/> Number Street <b>P.O. Box 30285</b> <hr/> <b>Salt Lake City UT 84130</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-1749</b>  When was the debt incurred: <b>07/2014</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>CreditCard</b>	\$574.00
<b>4.8</b> <b>Capital One Bank USA NA</b> <hr/> Nonpriority Creditor's Name <b>PO Box 30281</b> <hr/> Number Street <hr/> <b>Salt Lake City UT 84130</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-7036</b>  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	\$5,016.11
<b>4.9</b> <b>Capital One Bank USA NA</b> <hr/> Nonpriority Creditor's Name <b>PO Box 30281</b> <hr/> Number Street <hr/> <b>Salt Lake City UT 84130</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-4087</b>  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	\$178.10

		Total claim
<b>4.10</b> <b>Capital One Bank USA NA</b> <hr/> Nonpriority Creditor's Name <b>PO Box 30281</b> <hr/> Number Street <hr/> <b>Salt Lake City UT 84130</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-6269</b>  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	\$543.02
<b>4.11</b> <b>Charles Tuite</b> <hr/> Nonpriority Creditor's Name <b>PO Box 543</b> <hr/> Number Street <hr/> <b>Northborough MA 01532</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b>  When was the debt incurred: <b>11/24/2017</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Small Claim Judgement</b>	\$1,002.39
<b>4.12</b> <b>Collection</b> <hr/> Nonpriority Creditor's Name <b>476 W Vermont Ave</b> <hr/> Number Street <hr/> <b>Escondido CA 92025</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-3927</b>  When was the debt incurred: <b>12/2014</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>FactoringCompanyAccount</b>	\$208.00
<b>4.13</b> <b>Collection</b> <hr/> Nonpriority Creditor's Name <b>476 W Vermont Ave</b> <hr/> Number Street <hr/> <b>Escondido CA 92025</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-3875</b>  When was the debt incurred: <b>12/2014</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>FactoringCompanyAccount</b>	\$463.00

	Total claim
<div><div><div>4.14</div><div>Commonwealth of Mass</div><div>Nonpriority Creditor's Name</div><div>Dpt. of Unemplmt Assistance</div><div>Number Street</div><div>19 Standord St.</div><div>Boston MA 02114</div><div>City, State, ZIP Code</div><div>Who incurred the debt? Check one.</div><div><div><input type="checkbox"/> Debtor 1 only</div><div><input type="checkbox"/> Debtor 2 only</div><div><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</div><div><input type="checkbox"/> At least one of the debtors and another</div><div><input type="checkbox"/> Check if this claim is for a community debt</div><div>Is the claim subject to offset?</div><div><div><input checked="" type="checkbox"/> No</div><div><input type="checkbox"/> Yes</div></div></div></div><div><div>Last 4 digits of account number: -7385</div><div>When was the debt incurred: UNKNOWN</div><div>As of the date you file, the claim is: Check all that apply</div><div><div><input type="checkbox"/> Contingent</div><div><input type="checkbox"/> Unliquidated</div><div><input type="checkbox"/> Disputed</div></div><div>Type of NONPRIORITY unsecured claim:</div><div><div><input type="checkbox"/> Student loans</div><div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div><div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div><div><input checked="" type="checkbox"/> Other. Specify UI and WTF, Interest and Penalties</div></div></div></div>	

\$5,710.50

		Total claim
<b>4.18</b> <b>Dr. Bruce S. Fieldman</b> <hr/> <small>Nonpriority Creditor's Name</small> <b>48 Auburn St.</b> <hr/> <small>Number Street</small>  <hr/> <b>Auburn MA 01501</b> <hr/> <small>City, State, ZIP Code</small> <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: _____  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Small Claim Judgment</b>	\$495.62
<b>4.19</b> <b>Emily Montalvo</b> <hr/> <small>Nonpriority Creditor's Name</small> <b>c/o Sebastian Korth, Esq.</b> <hr/> <small>Number Street</small> <b>12 Maples Street</b> <hr/> <b>Ludlow MA 01056</b> <hr/> <small>City, State, ZIP Code</small> <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b>  When was the debt incurred: <b>11/06/2018</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Civil Claims Execution on Judgment</b>	\$8,094.33
<b>4.20</b> <b>Everest Bus. Funding</b> <hr/> <small>Nonpriority Creditor's Name</small> <b>GreenbergGrant&amp;Richards</b> <hr/> <small>Number Street</small> <b>PO Box 571811</b> <hr/> <b>Houston TX 77257</b> <hr/> <small>City, State, ZIP Code</small> <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-4555</b>  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Collection Account</b>	\$21,280.00
<b>4.21</b> <b>First Premier Bank</b> <hr/> <small>Nonpriority Creditor's Name</small> <b>3820 N Louise Ave</b> <hr/> <small>Number Street</small>  <hr/> <b>Sioux Falls SD 57107</b> <hr/> <small>City, State, ZIP Code</small> <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-6916</b>  When was the debt incurred: <b>07/2011</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>CreditCard</b>	\$704.00



		Total claim
<b>4.22</b> <b>First Premier Bank</b> <hr/> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <hr/> Number Street <b>PO Box 5524</b> <hr/> <b>Sioux Falls SD 57117</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-5781</b>  When was the debt incurred: <b>10/2017</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	\$338.00
<b>4.23</b> <b>Ford Motor Credit Co</b> <hr/> Nonpriority Creditor's Name <b>3620 Queen Palm Dr</b> <hr/> Number Street <b>Sabal Pavilion</b> <hr/> <b>Tampa FL 33619</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b>  When was the debt incurred: <b>05/30/2007</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Civil Action Judgment</b>	\$10,512.10
<b>4.24</b> <b>Ford Motor Credit Co</b> <hr/> Nonpriority Creditor's Name <b>3620 Queen Palm Dr</b> <hr/> Number Street <b>Sabal Pavilion</b> <hr/> <b>Tampa FL 33619</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-0206</b>  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Deficiency</b>	\$20,150.52
<b>4.25</b> <b>Ford Motor Credit Co</b> <hr/> Nonpriority Creditor's Name <b>3620 Queen Palm Dr</b> <hr/> Number Street <b>Sabal Pavilion</b> <hr/> <b>Tampa FL 33619</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b>  When was the debt incurred: <b>07/27/2007</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Civil Action Judgment</b>	\$10,863.05

		Total claim
<b>4.26</b> <b>Gm Financial</b> <hr/> Nonpriority Creditor's Name <b>P.O. Box 181145</b> <hr/> Number Street <hr/> <b>Arlington TX 76096</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-1809</b>  When was the debt incurred: <b>11/2015</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Lease - Auto Lease Deficiency</b>	\$6,594.00
<b>4.27</b> <b>Harrington Memorial Hosp.</b> <hr/> Nonpriority Creditor's Name <b>100 South Street</b> <hr/> Number Street <hr/> <b>Southbridge MA 01550</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-6954</b>  When was the debt incurred: <b>01/04/2018</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical</b>	\$177.67
<b>4.28</b> <b>Harrington Physician Srvc</b> <hr/> Nonpriority Creditor's Name <b>PO Box 40</b> <hr/> Number Street <hr/> <b>Southbridge MA 01550</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-9380</b>  When was the debt incurred: <b>07/04/2018</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical</b>	\$36.71
<b>4.29</b> <b>Hugh M. Cooper, MD, PC</b> <hr/> Nonpriority Creditor's Name <b>100 South Street</b> <hr/> Number Street <b>Suite 200</b> <hr/> <b>Southbridge MA 01550</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-4810</b>  When was the debt incurred: <b>03/14/2018</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical</b>	\$149.89

		Total claim
<b>4.30</b> <b>Imperial PFS</b> <hr/> Nonpriority Creditor's Name <b>GB Collects, LLC</b> <hr/> Number Street <b>1252 Haddonfield Berlin RD</b> <hr/> <b>Voorhees NJ 08043</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: \$2,082.12  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Collection Account</b>	
<b>4.31</b> <b>Internal Revenue Service</b> <hr/> Nonpriority Creditor's Name <b>Attn: Mrs. Couture</b> <hr/> Number Street <b>Ste 600 120 Front St.</b> <hr/> <b>Worcester MA 01608</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: \$6,429.29  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Taxes - 1040 Federal (2013)</b>	
<b>4.32</b> <b>Internal Revenue Service</b> <hr/> Nonpriority Creditor's Name <b>Attn: Mrs. Couture</b> <hr/> Number Street <b>Ste 600 120 Front St.</b> <hr/> <b>Worcester MA 01608</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: \$5,589.93  When was the debt incurred: <b>12/31/2010</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Income Taxes (1040 for year 2010)</b>	
<b>4.33</b> <b>Internal Revenue Service</b> <hr/> Nonpriority Creditor's Name <b>Attn: Mrs. Couture</b> <hr/> Number Street <b>Ste 600 120 Front St.</b> <hr/> <b>Worcester MA 01608</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: \$20,277.49  When was the debt incurred: <b>12/31/2015</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Income Taxes (1040 for 2015)</b>	

		Total claim
<b>4.34</b> <b>Internal Revenue Service</b> <hr/> Nonpriority Creditor's Name <b>Attn: Mrs. Couture</b> <hr/> Number Street <b>Ste 600 120 Front St.</b> <hr/> <b>Worcester MA 01608</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: _____  When was the debt incurred: <b>12/31/2014</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Income Taxes (1040 for year 2014)</b>	\$7,043.70
<b>4.35</b> <b>IPFS Corporation</b> <hr/> Nonpriority Creditor's Name <b>PO Box 15089</b> <hr/> Number Street <hr/> <b>Worcester MA 01615</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-1840</b>  When was the debt incurred: <b>12/08/2017</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other</b>	\$7,559.00
<b>4.36</b> <b>LINCARE INC</b> <hr/> Nonpriority Creditor's Name <b>PO BOX 9515</b> <hr/> Number Street <hr/> <b>Buffalo NY 14226</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-9203</b>  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical</b>	\$33.45
<b>4.37</b> <b>Lisa Sealey</b> <hr/> Nonpriority Creditor's Name <b>c/o Joseph Lussier, Esq.</b> <hr/> Number Street <b>484 Main St Ste 420</b> <hr/> <b>Worcester MA 01608</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b>  When was the debt incurred: <b>08/31/2016</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Small Claim Judgment</b>	\$3,750.00

	Total claim
<b>4.38</b> <b>MA Dept of Workforce Dev.</b> Nonpriority Creditor's Name <b>19 Staniford St.</b> Number Street  <b>Boston MA 02114</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-7385</b>  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Interest and Penalties</b>
<b>4.39</b> <b>MA Dept of Workforce Dev.</b> Nonpriority Creditor's Name <b>19 Staniford St.</b> Number Street  <b>Boston MA 02114</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-7385</b>  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Taxes - (UI and WTF)</b>
<b>4.40</b> <b>MA DOR</b> Nonpriority Creditor's Name <b>PO Box 7003</b> Number Street  <b>Boston MA 02204</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b>  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Taxes (State Income Tax Due)</b>
<b>4.41</b> <b>MA DOT</b> Nonpriority Creditor's Name <b>E-ZDriveMA</b> Number Street <b>27 Midstate Drive</b>  <b>Auburn MA 01501</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-6228</b>  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Tolls</b>

		Total claim
<b>4.42</b> <b>MA Health Connector</b> <hr/> <small>Nonpriority Creditor's Name</small> <b>146 Main Street</b> <hr/> <small>Number Street</small> <hr/> <b>Worcester MA 01608</b> <hr/> <small>City, State, ZIP Code</small> <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-3088</b>  When was the debt incurred: <b>UNKNOWN</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical</b>	\$785.18
<b>4.43</b> <b>Mitchell 1</b> <hr/> <small>Nonpriority Creditor's Name</small> <b>25029 Network Place</b> <hr/> <small>Number Street</small> <hr/> <b>Chicago IL 60673</b> <hr/> <small>City, State, ZIP Code</small> <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-4105</b>  When was the debt incurred: <b>06/01/2018</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other</b>	\$359.12
<b>4.44</b> <b>National Grid</b> <hr/> <small>Nonpriority Creditor's Name</small> <b>P.O. Box 960</b> <hr/> <small>Number Street</small> <hr/> <b>Northborough MA 01532</b> <hr/> <small>City, State, ZIP Code</small> <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-5086</b>  When was the debt incurred: <b>06/22/2018</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Utility</b>	\$1,601.47
<b>4.45</b> <b>Pratt Trucking Company</b> <hr/> <small>Nonpriority Creditor's Name</small> <b>PO Box 795</b> <hr/> <small>Number Street</small> <hr/> <b>Webster MA 01570</b> <hr/> <small>City, State, ZIP Code</small> <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-9087</b>  When was the debt incurred: <b>05/30/2018</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Trash Collection</b>	\$120.00

		Total claim
<b>4.46</b> <b>Santander Consumer Usa</b> <hr/> Nonpriority Creditor's Name <b>P.O. Box 961245</b> <hr/> Number Street <hr/> <b>Fort Worth TX 76161-1245</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-1000</b>  When was the debt incurred: <b>01/2011</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Automobile</b>	\$12,166.00
<b>4.47</b> <b>Shamrock Finance LLC</b> <hr/> Nonpriority Creditor's Name <b>74 Bare Hill Road</b> <hr/> Number Street <hr/> <b>Groveland MA 01834</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b>  When was the debt incurred: <b>07/26/2018</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Civil Session Judgment</b>	\$35,894.89
<b>4.48</b> <b>Sims Premier Fitness</b> <hr/> Nonpriority Creditor's Name <b>306 Sturbridge Rd</b> <hr/> Number Street <hr/> <b>Charlton MA 01507</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b>  When was the debt incurred: <b>06/24/2009</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Small Claims Judgment</b>	\$576.00
<b>4.49</b> <b>Southbridge Credit Union</b> <hr/> Nonpriority Creditor's Name <b>222 Main St</b> <hr/> Number Street <hr/> <b>Southbridge MA 01550</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b>  When was the debt incurred: <b>12/18/2003</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Small Claim Judgment</b>	\$2,207.05

		Total claim
<b>4.50</b> <b>U S Dept Of Ed Gsl Atl</b> <hr/> Nonpriority Creditor's Name <b>P.O. Box 5609</b> <hr/> Number Street <hr/> <b>Greenville TX 75403</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-8804</b>  When was the debt incurred: <b>11/2008</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Educational</b>	\$5,196.00
<b>4.51</b> <b>U S Dept Of Ed Gsl Atl</b> <hr/> Nonpriority Creditor's Name <b>P.O. Box 5609</b> <hr/> Number Street <hr/> <b>Greenville TX 75403</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-9267</b>  When was the debt incurred: <b>11/2008</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Educational</b>	\$10,696.00
<b>4.52</b> <b>Verizon</b> <hr/> Nonpriority Creditor's Name <b>P.O. Box 650584</b> <hr/> Number Street <hr/> <b>Dallas TX 75265</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-8924</b>  When was the debt incurred: <b>10/2015</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Agriculture</b>	\$233.00
<b>4.53</b> <b>Vincent Oil Company, Inc.</b> <hr/> Nonpriority Creditor's Name <b>34 Newman Ave.</b> <hr/> Number Street <hr/> <b>Southbridge MA 01550</b> <hr/> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b>  When was the debt incurred: <b>06/28/2012</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Small Claims Judgement</b>	\$7,472.42



	Total claim
<b>4.54</b> <b>Vincent Oil Company, Inc.</b> Nonpriority Creditor's Name <b>34 Newman Ave.</b> Number Street  <b>Southbridge MA 01550</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b> When was the debt incurred: <b>12/12/2006</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Civil Action Judgement</b>
<b>4.55</b> <b>Vincent Oil Company, Inc.</b> Nonpriority Creditor's Name <b>34 Newman Ave.</b> Number Street  <b>Southbridge MA 01550</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b> When was the debt incurred: <b>11/20/2008</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Small Claims Mediation Order</b>
<b>4.56</b> <b>Worcester T&amp;G</b> Nonpriority Creditor's Name <b>100 Front Street</b> Number Street <b>Floor 5</b>  <b>Worcester MA 01608</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b> When was the debt incurred: <b>03/21/2011</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Other - Small Claim Judgement</b>
<b>4.57</b> <b>Yellowstone Capital LLC</b> Nonpriority Creditor's Name <b>1 Evertrust Plaza</b> Number Street  <b>Jersey City NJ 07302</b> City, State, ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number: <b>-NOWN</b> When was the debt incurred: <b>10/10/2016</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Personal Loan</b>

**Part 3:** List Others to Be Notified for a Debt That You Already Listed

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5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

1

**AtT Mobility**

Creditor's Name

**Sunrise Credit Srvc**

Number Street

**260 Airport Plaza**

**Farmingdale NY 11735**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

2

**AtT Mobility**

Creditor's Name

**260 Airport Plaza Blvd**

Number Street

**Farmingdale NY 11735**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

3

**Capital One**

Creditor's Name

**1680 Capital One Dr.**

Number Street

**Mc Lean VA 22102**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

4

**Capital One**

Creditor's Name

**1680 Capital One Dr.**

Number Street

**Mc Lean VA 22102**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

5

**Capital One**

Creditor's Name

**1680 Capital One Dr.**

Number Street

**Mc Lean VA 22102**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.4 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

6

**Capital One**

Creditor's Name

**1680 Capital One Dr.**

Number Street

**Mc Lean VA 22102**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.6 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

<b>7</b> <b>Capital One Bank Usa N</b> Creditor's Name <b>P.O. Box 30281</b> Number Street  <b>Salt Lake City UT 84130</b> City, State, ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.6</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number:
<b>8</b> <b>Capital One Bank Usa N</b> Creditor's Name <b>P.O. Box 30281</b> Number Street  <b>Salt Lake City UT 84130</b> City, State, ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.4</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number:
<b>9</b> <b>Capital One Bank Usa N</b> Creditor's Name <b>P.O. Box 30281</b> Number Street  <b>Salt Lake City UT 84130</b> City, State, ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number:
<b>10</b> <b>Capital One Bank Usa N</b> Creditor's Name <b>P.O. Box 30281</b> Number Street  <b>Salt Lake City UT 84130</b> City, State, ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.7</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number:
<b>11</b> <b>Capital One Bank USA NA</b> Creditor's Name <b>Client Services Inc</b> Number Street <b>3451 Harry S Truman Blvd.</b>  <b>Saint Charles MO 63301</b> City, State, ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.9</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number:
<b>12</b> <b>Capital One Bank USA NA</b> Creditor's Name <b>1680 Capital One Dr</b> Number Street  <b>Mc Lean VA 22102</b> City, State, ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.8</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number:

13

Capital One Bank USA NA

Creditor's Name

Client Services Inc

Number Street

3451 Harry S Truman Blvd.

Saint Charles MO 63301

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

14

Capital One Bank USA NA

Creditor's Name

1680 Capital One Dr

Number Street

Mc Lean VA 22102

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

15

Capital One Bank USA NA

Creditor's Name

Client Services Inc

Number Street

3451 Harry S Truman Blvd.

Saint Charles MO 63301

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

16

Capital One Bank USA NA

Creditor's Name

1680 Capital One Dr

Number Street

Mc Lean VA 22102

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

17

Collection

Creditor's Name

120 Corporate Blvd Ste 100

Number Street

Norfolk VA 23502

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.12 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

18

Collection

Creditor's Name

120 Corporate Blvd Ste 100

Number Street

Norfolk VA 23502

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

**19**

**Credit One Bank Na**

Creditor's Name

**P.O. Box 98872**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.15 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

**Las Vegas NV 89193**

City, State, ZIP Code

**20**

**Credit One Bank Na**

Creditor's Name

**P.O. Box 98872**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.16 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

**Las Vegas NV 89193**

City, State, ZIP Code

**21**

**Credit Protection Association, L.P.**

Creditor's Name

**13355 Noel Road**

Number Street

**Suite 2100**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.44 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

**Dallas TX 75240**

City, State, ZIP Code

**22**

**Discover Fin Svcs Llc**

Creditor's Name

**POB 15316**

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.17 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

**Wilmington DE 19850**

City, State, ZIP Code

**23**

**Dudley District Ct.**

Creditor's Name

**Re: 364SC000421**

Number Street

**279 West Main Street**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.49 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

**Dudley MA 01571**

City, State, ZIP Code

**24**

**Dudley District Ct.**

Creditor's Name

**Re: 264SC000110**

Number Street

**279 West Main Street**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.18 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

**Dudley MA 01571**

City, State, ZIP Code

25

**Dudley District Ct.**

Creditor's Name

**Re: 964SC0000665**

Number Street

**279 West Main Street**

**Dudley MA 01571**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.48 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

26

**Dudley District Ct.**

Creditor's Name

**Re: 1064SC001414**

Number Street

**279 West Main Street**

**Dudley MA 01571**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.56 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

27

**Dudley District Ct.**

Creditor's Name

**Re: 1264SC000175**

Number Street

**279 West Main Street**

**Dudley MA 01571**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.53 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

28

**Dudley District Ct.**

Creditor's Name

**Re: 664CV000320**

Number Street

**279 West Main Street**

**Dudley MA 01571**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.54 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

29

**Dudley District Ct.**

Creditor's Name

**Re: 1764SC1240**

Number Street

**279 West Main Street**

**Dudley MA 01571**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.11 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

30

**Dudley District Ct.**

Creditor's Name

**Re: 764CV000243**

Number Street

**279 West Main Street**

**Dudley MA 01571**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.23 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

**31**  
**Dudley District Ct.**  
Creditor's Name  
**Re: 764SP000031**  
Number Street  
**279 West Main Street**  
**Dudley MA 01571**  
City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line 4.55 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims  
Last 4 digits of account number:

**32**  
**Dudley District Ct.**  
Creditor's Name  
**Re: 1664SC000379**  
Number Street  
**279 West Main Street**  
**Dudley MA 01571**  
City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line 4.37 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims  
Last 4 digits of account number:

**33**  
**Dudley District Ct.**  
Creditor's Name  
**Re: 764CV000266**  
Number Street  
**279 West Main Street**  
**Dudley MA 01571**  
City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line 4.25 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims  
Last 4 digits of account number:

**34**  
**ERC**  
Creditor's Name  
**8014 Bayberry Rd.**  
Number Street  
**Jacksonville FL 32256**  
City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims  
Last 4 digits of account number:

**35**  
**First Down Funding**  
Creditor's Name  
**27 Maryland Ave.**  
Number Street  
**Annapolis MD 21401**  
City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims  
Last 4 digits of account number:

**36**  
**Frank J. Maier, Esq.**  
Creditor's Name  
**500 Main St.**  
Number Street  
**Suite 580**  
**Worcester MA 01608**  
City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line 4.56 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims  
Last 4 digits of account number:

37

**Frank J. Maier, Esq.**

Creditor's Name

**500 Main St.**

Number Street

**Suite 580**

**Worcester MA 01608**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.18 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

38

**Frank J. Maier, Esq.**

Creditor's Name

**500 Main St.**

Number Street

**Suite 580**

**Worcester MA 01608**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.49 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

39

**Internal Revenue Service**

Creditor's Name

**Attn: Mrs. Couture**

Number Street

**Ste 600 120 Front St.**

**Worcester MA 01608**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.34 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

40

**James J. McNutty, Esq.**

Creditor's Name

**40 Court St.**

Number Street

**Ste. 1150**

**Boston MA 02108**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.47 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

41

**Jennie Lynn Caissie, Esq.**

Creditor's Name

**Michael V. Caplette**

Number Street

**Three Bowlen Ave**

**Southbridge MA 01550**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.55 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:

42

**John Morgan**

Creditor's Name

**Lincoln & Morgan, LLC**

Number Street

**600 W Broadway St 700**

**San Diego CA 92101**

City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.20 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number:



<b>43</b> <b>Kenneth C. Wilson, Esq.</b> Creditor's Name <b>Lustig Glaser&amp;Wilson, PC</b> Number Street <b>245 Winter St</b> <b>Waltham MA 02451</b> City, State, ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.23</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number:
<b>44</b> <b>Kenneth C. Wilson, Esq.</b> Creditor's Name <b>Lustig Glaser&amp;Wilson, PC</b> Number Street <b>245 Winter St</b> <b>Waltham MA 02451</b> City, State, ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.25</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number:
<b>45</b> <b>Lustig, Glasser &amp; Wilson, P.C.</b> Creditor's Name <b>File #1A866</b> Number Street <b>PO Box 549287</b> <b>Waltham MA 02454</b> City, State, ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.24</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number:
<b>46</b> <b>Michael V. Caplette, Esq.</b> Creditor's Name <b>Three Bowlen Ave</b> Number Street <b>Southbridge MA 01550</b> City, State, ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.53</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number:
<b>47</b> <b>Michael V. Caplette, Esq.</b> Creditor's Name <b>Three Bowlen Ave</b> Number Street <b>Southbridge MA 01550</b> City, State, ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.54</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number:
<b>48</b> <b>National Grid</b> Creditor's Name <b>National Grid</b> Number Street <b>P.O. Box 960</b> <b>Northborough MA 01532-0960</b> City, State, ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.44</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number:

**49**  
**Salem District Court**  
Creditor's Name  
**Re: 1836CV000363**  
Number Street  
**56 Federal St**  
**Salem MA 01970**  
City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line 4.47 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims  
Last 4 digits of account number:

**50**  
**Southbridge Credit Union**  
Creditor's Name  
**44445 Lake Forest Dr**  
Number Street  
**Suite 350**  
**Cincinnati OH 45242**  
City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line 4.49 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims  
Last 4 digits of account number:

**51**  
**Springfield District Ct.**  
Creditor's Name  
**Re: 1823CV433**  
Number Street  
**50 State Street**  
**Springfield MA 01103**  
City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims  
Last 4 digits of account number:

**52**  
**Yellowstone Capital LLC**  
Creditor's Name  
**30 Broad Street**  
Number Street  
**14th Floor, Ste 1462**  
**New York NY 10004**  
City, State, ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line 4.57 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims  
Last 4 digits of account number:

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

**6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.**

		Total claim
<b>Total claims from Part 1</b>		
6a. Domestic support obligations .....	6a.	\$0.00
6b. Taxes and certain other debts you owe the government .....	6b.	\$0.00
6c. Claims for death or personal injury while you were intoxicated.....	6c.	\$0.00
6d. Other. Add all other priority unsecured claims. Write that amount here.....	6d.	\$0.00
6e. Total Add lines 6a through 6d. ....	6e.	\$0.00
<b>Total claims from Part 2</b>		
6f. Student loans .....	6f.	\$0.00
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims .....	6g.	\$0.00
6h. Debts to pension or profit-sharing plans, and other similar debts.....	6h.	\$0.00
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.....	6i.	\$259,905.66

		Total claim
6j. Total. Add lines 6f through 6i. ....	6j.	<u>\$259,905.66</u>

**Fill in this information to identify your case:**

Debtor 1 Roland W. Tremblay Jr.

Debtor 2 Lisa J. Tremblay  
(Spouse, if filing)

United States Bankruptcy Court for the District of Massachusetts

Case number 4:19-bk-40372  
(If known)

☒ Check if this is an amended filing

**Official Form 106Dec**

**Amended Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?**

- ☒ No  
☐ Yes. Name of person N/A. Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

**Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.**

/s/ Roland W. Tremblay Jr.  
Signature of Debtor 1

04/15/2019  
Date

/s/ Lisa J. Tremblay  
Signature of Debtor 2

04/15/2019  
Date

**United States Bankruptcy Court  
District of Massachusetts  
Worcester Division**

In re: **Tremblay, Roland and Lisa**

Case No. **4:19-bk-40372**

**VERIFICATION OF POST-PETITION CREDITOR MATRIX**

I(we) verify that the attached list of creditors is a true and complete list of creditors holding claims incurred after the filing of this case to the best of my(our) knowledge.

/s/ Roland W. Tremblay Jr.  
Debtor

04/15/2019  
Date

/s/ Lisa J. Tremblay  
Joint Debtor

04/15/2019  
Date